

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2000

Application or Docket Number

*AD 6745 CIS NA*

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

TOTAL CLAIMS	16	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	16 minus 20=	* 6
INDEPENDENT CLAIMS	2 minus 3 =	* 0
MULTIPLE DEPENDENT CLAIM PRESENT		<input checked="" type="checkbox"/>

SMALL ENTITY  
TYPE

OR OTHER THAN  
SMALL ENTITY

RATE	FEE	RATE	FEE
BASIC FEE	355.00	BASIC FEE	710.00
X\$ 9=		X\$18=	
X40=		X80=	
+135=		+270=	270
TOTAL		TOTAL	980

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
					RATE	ADDI- TIONAL FEE
Total	*	Minus	**	=		
Independent	*	Minus	***	=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>				

SMALL ENTITY OR OTHER THAN  
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDITIONAL FEE		TOTAL ADDITIONAL FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
					RATE	ADDI- TIONAL FEE
Total	*	Minus	**	=		
Independent	*	Minus	***	=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDITIONAL FEE		TOTAL ADDITIONAL FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
					RATE	ADDI- TIONAL FEE
Total	*	Minus	**	=		
Independent	*	Minus	***	=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDITIONAL FEE		TOTAL ADDITIONAL FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Ext. of Time Two months 400  
hmv 110 ~~UNIT~~  
~~290~~

DATE MAILED:

## NOTICE OF INSUFFICIENT FILING FEES

APPLICANT IS GIVEN 30 DAYS FROM THE DATE OF MAILING OF THIS NOTICE WITHIN WHICH TO SUBMIT THE BALANCE DUE. Extension of this 30 day period under CFR 1.136(a) will not be permitted. Failure to respond within this period will result in the application becoming abandoned. 35 U.S.C. 133.

The filing fees submitted in connection with this application are insufficient. See the attached Patent Application-Pee Determination Record (Form PTO-875). The balance due for additional claims and/or multiple dependent claims is summarized below:

A. Filing Fees due upon filing the application

Total Filing Fees Due	= \$ _____
Less Filing Fees Submitted	= \$ _____
BALANCE DUE	= \$ _____

B. Fees due in connection with the amendment filed on \_\_\_\_\_

Total Fees Due	= \$ _____
Less Fees Submitted	= \$ _____
BALANCE DUE	= \$ _____

ATTACHMENT: FORM PTO-875

Clerk of Group \_\_\_\_\_

APPLICANT: PLEASE COMPLETE THIS PORTION AND RETURN THIS NOTICE WITH PAYMENT

Fee submitted \$ \_\_\_\_\_ Signature \_\_\_\_\_

### CERTIFICATE OF MAILING

I hereby certify that this notice and the required additional fee are being deposited with the U.S. POSTAL SERVICE as first class mail in an envelope addressed to Commissioner of Patents and Trademarks, Washington, D.C. 20531, on \_\_\_\_\_

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_